

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

ELECTION AND POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	
	Filing Date	
	First Named Inventor	Richard Soltys
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	120109.406

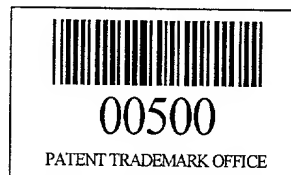
I hereby appoint:

☒ Practitioners at Seed IP Law Group PLLC

OR

☐ Practitioner(s) named below:

Name	Registration Number



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Firm or
Individual Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*☒ As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor**SIGNATURE of Applicant or Assignee of Record**

Name	Richard Soltys
Signature	
Date	12/7/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.